PTO/SB/05 (08-03) Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. DM-3 Attomey Docket No. UTILITY David J. MacDonald PATENT APPLICATION First Inventor ADJUSTABLE METAL FRAME TRANSMITTAL Title EV179657791US (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Mail Stop Patent Application Commissioner for Patents ADDRESS TO: APPLICATION ELEMENTS P.O. Box 1450 Alexandria VA 22313-1450 See MPEP chapter 600 concerning utility patent application contents. CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) 1. [7] Computer Program (Appendix) (Submit an original and a duplicate for fee processing) Nucleotide and/or Amino Acid Sequence Submission Applicant claims small entity status. 2. 🗹 (if applicable, all necessary) See 37 CFR 1.27. Computer Readable Form (CRF) [Total Pages_ 3. Specification (preferred arrangement set forth below) Descriptive title of the invention
 Cross Reference to Related Applications Specification Sequence Listing on: - Statement Regarding Fed sponsored R & D CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix ii. Paper - Background of the Invention - Brief Summary of the Invention c. Statements verifying identity of above copies - Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS - Detailed Description - Claim(s) - Abstract of the Disclosure Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of 4. Drawing(s) (35 U.S.C. 113) [Total Sheets __ 10. Attorney (when there is an assignee) English Translation Document (if applicable) [Total Sheets _ 5. Oath or Declaration Copies of IDS Information Disclosure a. Newly executed (original or copy) Statement (IDS)/PTO-1449 Citations b. Copy from a prior application (37 CFR 1.63(d)) Preliminary Amendment Return Receipt Postcard (MPEP 503) (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 name in the prior application, see 37 CFR 16. (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1.63(d)(2) and 1.33(b). or its equivalent. Application Data Sheet. See 37 CFR 1.76 6. 17. 🔲 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: of prior application No.: Continuation-in-part (CIP) Divisional Continuation Art Unit: 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS OR Correspondence address below 1054 \square **Customer Number:** Name LEONARD TACHNER

17961 SKY PARK CIRCLE Address SUITE 38-E Zip Code 92614 State CALIFORNIA Citv IRVINE Fax 949-955-2415 Telephone | 949-752-8525 Country USA Registration No. (Attorney/Agent) | 26,344 Name (Print/Type) LEONAROTACHNER

This collection of information is required by 37 CFR +53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the Inis collection of information is required by 37 CFR T.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature

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THE TO A MODULT A		Complete if Known							
FEE TRANSMITTAL		Application Number							
		Filing Date			October 3	October 30 , 2003			
for FY 2004		First Named Inventor		r David J. I	David J. MacDonald				
Effective 10/01/2003. Patent fees are subject to annual revision.	Examiner Name								
Applicant claims small entity status. See 37 CFR 1.27	Art Unit								
TOTAL AMOUNT OF PAYMENT (\$) 385	Attorney Docket No.			DM-3	DM-3				
					CAL CUL ATIC	LCULATION (continued)			
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
	3. ADDITIONAL FEES Large Entity 1 Small Entity								
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1. BASIC FILING FEE	1253	950		475	Extension for repl	ly within third	month		
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1001 770 2001 385 Utility filing fee 385 1002 340 2002 170 Design filing fee	1401	330	2401		Notice of Appeal			 	
1002 340 2002 170 Design filing fee 1003 530 2003 265 Plant filing fee	1402	330	2402		Filing a brief in su		appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403		Request for oral I				
1005 160 2005 80 Provisional filing fee	1451		l		Petition to institut				
SUBTOTAL (1) (\$) 385	1452		2452		Petition to revive				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2453 2501		Petition to revive Utility issue fee (iai		
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Total Claims 10 -20** = 0 x 9 = 0	1503		2503	320	Plant issue fee				
Independent 2 - 3** = 0 X 42 = 0	1460	130	1460	130	Petitions to the	Commissione	er		
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1202 18 2202 9 Claims in excess of 20	1809	9 770	2809	385	Filing a submiss	ion after fina	l rejection	1 1	
1201 86 2201 43 Independent claims in excess of 3					(37 CFR 1.129) For each addition		to be		
1203 290 2203 145 Multiple dependent claim, if not paid	1810	0 770	2810		examined (37 C	FR 1.129(b)			
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**or number previously paid, if greater; For Reissues, see above	(Complete (if applicable))								
SUBMITTED BY			ration No	. 26	5,344		(949) 752-85	5	
Name (Print/Type) LEONARD TACHNER		(Attorne	ey/Agent)	1 -	-,	Date	October 20		

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Signature